	PATENT APPLICATION TO THE PATENT APPLICATION								Application or Docket Number				
	PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001							D	10/073,668				
		CLAIMS		SMAL			SMALI	ENTITY			R THAN		
h	TOTAL CLAIM	(Colu	(Column 1) (Column 2)		TYPE		0		L ENTITY		
.		FOR		<u>8</u>				RATE	FEE		RATE	FEE	
-			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	型 370.0	Ó OF	BASIC FE	€ 740.00	
╟	TOTAL CHARG	EABLE CLAIMS	1	€ minus 20=		•		X\$ 9:		OF	X\$18=		
- II-	NDEPENDENT			/ minus 3 =				X42=		٦.	X84=	 	
L	MULTIPLE DEP					+140:	- 		-	 			
٠]٦	If the difference in column 1 is less than zero, enter "0" in column 2									OF	+280=		
			TOTAL	<u> </u>	_ _ OF	TOTAL	L						
	CLAIMS AS AMENDED • PART II (Column 1) (Column 2) (Column 3)							SMALL ENTITY OR SMALL ENTITY					
	T T T T T T T T T T T T T T T T T T T	REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	4	RATE	, ADDI- TIONAL	
A MENCHEN	Total	. 8	Minus		20		11	X\$ 9=	1	OR	X\$18=	FEE	
	Independent		Minus	240	3	•		X42=		- ```	X84=		
L	FIRST PRES	ENTATION OF A	(ULTIPLE D	PENDENT	CLAIM		l	•	+	OR		·	
						•	L	+140=.		OR	+280 =		
	10/12/04		`				A	TOTA DDIT. FEI	- 10	OR	TOTAL ADDIT. FEE		
ır		(Column 1)		(Colum		(Column 3)	1 6	·	-	-			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOI PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
2	Total	• 23	Minus	→ ∂	0	- 3		X\$ 9=		OR	X\$18=	54	
B	Independent FIRST PRES	• 5 INTATION OF M	Minus	PENDENT (Y AIL	= 2		X42=		OR	X84=	172	
	<u> </u>	•		CHOCKI				+140=		OR	+280=	;1	
							_	TOTAL		OR	TOTAL		
		(Column 1)		(Column	n 2)	(Column 3)	AL	JUH. FEE		, ¢	ODIT. FEE		
ပ		CLAIMS REMAINING		HIGHE	57		_		ADDI-			4001	
E		AFITER		PREVIOU	SLY	PRESENT EXTRA	. .	RATE	TIONAL		RATE	ADDI- TIONAL	
AMENDMENT C	Total	•	Minus	••		.	1	X\$ 9=	FEE	- 1	X\$18=	FEE	
	Independent	•	Minus .	***			-			OR			
٢	FIRST PRESE	NTATION OF ML	LTIPLE DEF	ENDENT C	LAIM		L	X42=		OR	X84=		
• :	* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.									OR	+280=		
-	"I the Highest Number Previously Paid For IN THIS SPACE is toon than 20, and 200									OR A	TOTAL		
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE													
_													
FORM PTO-978 (Raw 8(01)) Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE												OMNERCE	